



## UNITED STATES PATENT AND TRADEMARK OFFICE

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UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 6172

<b>SERIAL NUMBER</b> 09/749,189	<b>FILING DATE</b> 12/27/2000 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> TOBINICK 3.0-012 (CIP)
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## APPLICANTS

Edward L. Tobinick, Los Angeles, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

*Verified*  
THIS APPLICATION IS A CIP OF 09/654,996 09/05/2000  
WHICH IS A CIP OF 09/563,651 05/02/2000  
WHICH IS A CIP OF 09/476,643 12/31/1999 PAT 6,177,077  
WHICH IS A CIP OF 09/275,070 03/23/1999 PAT 6,015,557  
WHICH IS A CIP OF 09/256,388 02/24/1999 ABN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 03/14/2001

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING	TOTAL CLAIMS 44	INDEPENDENT CLAIMS 18
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

## ADDRESS

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## TITLE

Cytokine antagonists for the treatment of sensorineural hearing loss

**FILING FEE  
RECEIVED**  
355

FEES: Authority has been given in Paper  
No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
No. \_\_\_\_\_ for following:

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees ( Filing )
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
<input type="checkbox"/> 1.18 Fees ( Issue )
<input type="checkbox"/> Other _____
<input type="checkbox"/> Credit